

PTO/SB/01 (06-03)
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number: OR <input checked="" type="checkbox"/> Correspondence address below			
Name <i>JOHN R. ROSS</i>			
Address <i>TREX ENTERPRISES, 10 FSS PACIFIC CENTER CT.</i>			
City <i>SAN DIEGO</i>		State <i>CA</i>	ZIP <i>92121</i>
Country <i>USA</i>		Telephone <i>858-646-5488</i>	Fax <i>858-646-5581</i>
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned Inventor			
Given Name (first and middle [if any]) <i>KENNETH R.</i>		Family Name or Surname <i>TANG</i>	
Inventor's Signature <i>Kenneth R. Tang</i>		Date	
Residence: City <i>ALPINE</i>	State <i>CA</i>	Country <i>USA</i>	Citizenship <i>USA</i>
Mailing Address <i>2729 VIA ASOLEADOO</i>			
City <i>ALPINE</i>	State <i>CA</i>	ZIP <i>91901</i>	Country <i>US</i>
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned Inventor			
Given Name (first and middle [if any]) <i>ALLEN M.</i>		Family Name or Surname <i>HUNTER II</i>	
Inventor's Signature <i>Allen M. Hunter Jr</i>		Date <i>8/19/04</i>	
Residence: City <i>KIHEI</i>	State <i>HI</i>	Country <i>USA</i>	Citizenship <i>USA</i>
Mailing Address <i>316 PUALOK NANI PLACE</i>			
City <i>KIHEI</i>	State <i>HI</i>	ZIP <i>96753</i>	Country <i>USA</i>
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or OLR attached hereto.			

[Page 2 of 2]

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet

Page _____ of _____

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
<i>BETTY W.</i>		<i>TANG</i>	
Inventor's Signature			
Residence: City	State	Country	Citizenship
<i>Ac Pine</i>	<i>CA</i>	<i>USA</i>	<i>USA</i>
Mailing Address			
Mailing Address <i>2729 VIA ASOLEADO</i>			
City	State	Zip	Country
<i>AC PINE</i>	<i>CA</i>	<i>91901</i>	<i>USA</i>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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O I P E

AUG 9 2004

PTO/SB/81 (09-03)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/810,778
Filing Date	3/25/2004
First Named Inventor	TANG
Title	LIGHT-TRIGGERED TATTOO PROCESS
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

 Practitioners associated with the Customer Number:

OR

 Practitioner(s) named below:

Name	Registration Number
JOHN R. ROSS	30,530

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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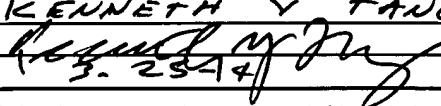
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OR

<input checked="" type="checkbox"/> Firm or Individual Name	JOHN R. ROSS			
Address	TREK ENTERPRISES CORP			
Address	10955 PACIFIC CENTER CT			
City	SAN DIEGO	State	CA	Zip
Country	US			
Telephone	858-646-5478	Fax	858-646-5581	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	KENNETH Y TANG		
Signature			
Date	3-25-04	Telephone	619-449-0998

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY
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CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/1810,778
Filing Date	3/25/2007
First Named Inventor	TANG
Title	LIGHT-TRIGGERED TATTOO PROCESS
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

 Practitioners associated with the Customer Number:

OR

 Practitioner(s) named below:

Name	Registration Number
JOHN R. ROSS	30,530

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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 The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	John R. Ross			
Address	TREX ENTERPRISES CORP			
Address	10455 PACIFIC CENTER CT			
City	SAN DIEGO	State	CA	Zip 92121
Country	USA			
Telephone	858-646-5488	Fax	858-646-5581	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	BETTY W. TANG		
Signature			
Date	6/20/07	Telephone	619-495-0998

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/61 (08-05)
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 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/810,728
Filing Date	3/25/2004
First Named Inventor	TANF
Title	LIGHT-TRIGGERED TATTOO MACHINES
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

Practitioners associated with the Customer Number:

OR

Practitioner(s) named below:

Name	Registration Number
JOHN R. ROSS	30,530

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

OR

The address associated with Customer Number:

OR

<input checked="" type="checkbox"/>	firm or individual name	JOHN R. ROSS	
Address	TREX ENTERPRISES CORP		
Address	10255-PACIFIC CENTER CT		
City	SAN DIEGO	State	CA
Country	US		
Telephone	858-646-5788	Fax	858-646-5581

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 1.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86)

SIGNATURE of Applicant or Assignee of Record

Name	Allen M. Hunter III
Signature	<i>Allen M. Hunter, III</i>
Date	9/4/04
Telephone	808-281-1020

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

3	Total of 3 forms are submitted.
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